

Part A, Permit Process --- Internal Checklist

ID Number AZD088301213 Inst Name Union Manufacturing Inc.

Refer to Form No:	Interim Regulatory Requirements	Indicate by your initials:		Valid Prm'l Date?
		Yes	No	
1	T/S/D Facility? (If No, return to respondent.)			
3	Form 1 received?			
1	Form 3 received?			
1 & 3	Postmarked on or before November 19, 1980?			
3	Date of operation entered?			
3	Date of operation on or before November 19, 1980?			
Notif. record	Notifier?			
"	Notified on or before August 18, 1980?			
1	Form 1, XIII B signed?			
3	Form 3, IX B Signed?			

If all ten items above are initialed in the Yes column, generate Interim Status Acknowledgement and indicate the trigger date here:

ret 7/22
ret 1/22

PHASE TWO

1	Unsure if regulated or non-regulated?		
3	New facility?		
1 & 3	Core items missing? If Yes, indicate which items: Facility name____; location____; mail address____; operator info____; certification____; process info____; waste info____; owner____; sigs____.		

PHASE THREE

1 & 3	Non-core items missing? If Yes, indicate which items: Maps____; photos____; drawings____; lat/long____. Other observations and comments:
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Still incorrect - see note on back - ck w/ Bill

Log out/Log in
on reverse side.

Received Date Stamp
19 NOV 1980
(Stamp forms also)